

SECRET

Approved For Release 2006/11/13 : CIA-RDP75-00399R000100110081-6

REPORTS INVENTORY						CONTROL NO.	
PREPARE IN DUPLICATE 1. TITLE OF REPORT (if a fill-in report include Form No.) <div style="text-align: center; font-weight: bold;">Financial Management Improvement Report (feeder)</div>						DDS/OF-147 2. TYPE OF REPORT <div style="display: flex; justify-content: space-between;"> <div style="width: 40px; text-align: center;">STATISTICAL</div> <div style="width: 40px; text-align: center;"><input checked="" type="checkbox"/> NARRATIVE</div> <div style="width: 40px; text-align: center;"><input type="checkbox"/> MACHINE-NAME LISTING</div> </div>	
3. FUNCTIONAL AREA		PERSONNEL LOGISTICS MEDICAL		TRAINING SECURITY <input checked="" type="checkbox"/> FINANCE		ADMIN. GENERAL OTHER (specify)	
4. NO. OF COPIES PREPARED <div style="text-align: center;">2</div>		5. FREQUENCY (weekly, monthly, quarterly, etc.) <div style="text-align: center;">Annual</div>				6. DISTRIBUTION (No. of components not number of copies) <div style="text-align: center;">17</div>	
7. FORMAT (memorandum, form computer print-out, etc) Memorandum		8. ADP PROCESSING <div style="display: flex; justify-content: space-between;"> <div style="width: 40px; text-align: center;">YES</div> <div style="width: 40px; text-align: center;">NO</div> </div> <input checked="" type="checkbox"/> IF YES GIVE ADP PROCESSING NO.		9. DIRECTIVE AUTHORITY REQUIRING REPORT <div style="text-align: center;">BOB Bulletin 70-13</div>			
10. PREPARING COMPONENT (include lowest level contributing information to report) <div style="text-align: center;">SIPS</div>				11. FEEDER REPORTS (State total number and identify by Title, Form No., or nomenclature. Attach separate sheet if necessary.)			
12. COST FACTORS							
A. MANUAL PREPARATION AND REVIEW COSTS							
GRADE	HOURLY RATE	<input checked="" type="checkbox"/>	HOURS PER REPORT	=	COST PER REPORT	<input checked="" type="checkbox"/>	TIMES PREPARED = COST PER YEAR
GS-15	\$11.36		3		\$ 34.08		1 \$ 34.08
B. COSTS OF COMPUTER PRODUCED REPORTS							
TOTAL COSTS PER YEAR						\$ 34.08	
13. COMPLETE DETAILED JUSTIFICATION FOR THIS REPORT (In addition to directive or authority cited in item 9). IF KNOWN, INCLUDE DATE REPORT WAS FIRST STARTED AND COMPONENT WHO ESTABLISHED REQUIREMENT.							
14. FUTURE GOALS							
GOAL PROPOSED BY COMPONENT FOR THIS REPORT <div style="display: flex; justify-content: space-between;"> <div style="width: 40px; text-align: center;">RETAIN AS IS</div> <div style="width: 40px; text-align: center;"><input type="checkbox"/> OTHER (explain)</div> </div> <div style="display: flex; justify-content: space-between;"> <div style="width: 40px; text-align: center;">CHANGE</div> <div style="width: 40px; text-align: center;"><input type="checkbox"/></div> </div> <div style="display: flex; justify-content: space-between;"> <div style="width: 40px; text-align: center;">DISCONTINUE</div> <div style="width: 40px; text-align: center;"><input type="checkbox"/></div> </div>						ESTIMATED SAVINGS <div style="display: flex; justify-content: space-between;"> <div style="width: 40px; text-align: center;">MAN-HOURS</div> <div style="width: 40px; text-align: center;">DOLLARS</div> </div>	
16. DATE OF INVENTORY		17. NAME AND TITLE OF PERSON FURNISHING INFORMATION					18. EXTENSION
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